

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	6		2-23-00
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1	✓	✓	10/26/00
2		✓	10/26/00
3		✓	10/26/00
4		✓	10/26/00
5		✓	10/26/00
6		✓	10/26/00
7		✓	10/26/00
8	✓	✓	10/26/00
9		✓	10/26/00
10		✓	10/26/00
11	✓	✓	10/26/00
12		✓	10/26/00
13	✓	✓	10/26/00
14		✓	10/26/00
15		✓	10/26/00
16	✓	✓	10/26/00
17	✓	✓	10/26/00
18	✓	✓	10/26/00
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49		✓	10/26/00
50		✓	10/26/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

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